Statement

Names of the some of the brands of Mineral Water available in the market

1. Adna Mineral
2. Amrit Aqua
3. Amarjal
4. Amust
5. Aqua Fresh
6. Aqua Plus
7. Bisleri
8. Caps
9. Cherio
10. Deep Spring
11. Deu Drops
12. Fitt
13. Fizzy
14. Florida
15. Fountain
16. Ganga
17. Gold Star
18. Gold Drop
19. Himalaya Aqua Pura
20. Ice Ozonised Spring Water
21. Kingfisher
22. Mahak Pio Pio
23. Nirmal
24. Nura Aqua Pura
25. Oasis
26. Parle Bailley
27. Penguin
28. Prakash Aqua
29. S.M. Pepy
30. Stream
31. Trupti
32. Voltic
33. Yes
34. Kauvery

Use of Unapproved Contraceptives

980. SHRI K.R. MALKANI: Will the PRIME MINISTER be pleased to state:

(a) whether Government are aware that an untested and unapproved carcinogenic contraceptive like Quinacrine is being used in the lady Hardinge Medical College and other official and non-official medical centres in several parts of the country, as reported in "The Statesman" dated the 9th April, 1997;

(b) whether any action has been taken against the doctors and institutions using Quinacrine; and

(c) whether this dangerous drug is being promoted in India by two American doctors, as reported in the Times of India dated the 16th March, 1997?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI RENUKA CHOWDHURY): (a) and (b) The drug Quinacrine was used for the study purpose in 1995-96 as a part of post-graduate thesis by lady Hardinge Medical College with the permission of its local Ethical Committee. The drug is no longer being used at LHMC. The Indian Council of Medical Research (ICMR) had initiated in 1993 a pilot study entitled "Clinical evaluation of Quinacrine Pellets for female sterilisation — a does finding study" at two Human Reproduction Centes of ICMR. A total of 8 women were enrolled and the results of study were reviewed by Toxicology Review Panel of ICMR. The study was discontinued in 1994 due to high failure rate (failure observed in 4 out of 8 women, side effects (high fever) in two women and lack of toxicity date available globally.

(c) LHMC have reported that the drug was obtained from Dr. Elton Kessel through Dr. J.K. Jain, President, IF.F.H.

Medical Reimbursement facility to Retired Government Employees

981. SHRI RAM GOPAL YADAV:
SHRI ISH DUTT YADAV:

Will the PRIME MINISTER be pleased to state:

(a) whether Government's attention has been drawn to the news-item published in 'The Times of India' dated the 28th May, 1997 under the caption "Right to life includs Right to health";

(b) whether the Supreme Court has upheld the claim of reimbursement of

medical expenses, in toto, incurred by a retired Central Government employee;

(c) if so, whether Government are considering to implement the decision of the apax Court be extending medical facilities to retired Government employees living in the area outside the jurisdiction of CGHS and making them eligible for reimbursement of such expenses;

(d) if so, the details thereof; and

(e) if not, the reasons therefor?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI RENUKA CHOWDHURY): (a) and (b) Based on the facts of the case of an employee of the Govt, of Punjab, the Supreme Court has held that "it is but the duty of the State of bear the expenditure incurred by the Govt, servant. Expenditure, thus, incurred requires to be reimbursed by the State to the employee". The court has further observed that "having had the constitutional obligation to bear the expenses for the Govt. Servant while in service or after retirement from service, as per the policy of the Govt, the Govt, is required to fulfil the constitutional obligation. Necessarily, the State has to bear the expenses incurred in that behalf.

(c) to (e) As per existing Rules, the serving Central Govt, employees are extended medical facilities either under CGHS or under CS(MA) Rules. The pensioners are covered only under CGHS. The Fifth Central' Pay Commission, in its Report, has recommended extension of CS(MA) Rules, 1944, to pensioners, not covered under CGHS, in a restricted manner "so as to facilitate reimbursement of expenditure on hospitalisation in a Govt, hospital/private hospital recognised under CGHS or under CS(MA) Rules for the purpose". This proposal is under examination of the Government.

Spread of Hepatitis-B in the Country

982. SHRI JANARDHANA POOJARY:
SHRI IQBAL SINGH:

Will the PRIME MINISTER be pleased to state:

(a) whether Government's attention has been drawn to the article published in India Today, dated the 30th June, 1997 under the caption 'Hepatitis-B killer on the prowl, more infectious than HIV, the hepatitis virus is taking a growing toll in India;

(b) if so, whether Government are taking any steps to fight this menace; if so, the details thereof; and

(c) if not, the reasons therefor?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI RENUKA CHOWDHURY): (a) Yes, Sir.

(b) The following steps have been taken for prevention and control of Hepatitis-B infection;

(1) It is mandatory to screen all blood donations for Hepatitis-B virus before transfusion.

(2) States and Union Territories have been advised to take preventive measures and immunize hospital workers.

(3) Efforts are being made to promote safe sex behaviour under the National AIDS Control Programme. The routes of transmission for both diseases are the same.

(4) Provision of separate syringe and separate needle for each vaccination under the Universal Immunisation Programme.

(5) It has been decided to immunize hospital workers of Central Government Hospitals against Hepatitis-B.

(6) Guidelines have been issued for the use of a separate sterile syringe and needle for each injection.

(7) Health Education.